



Application Data Sheet

Application Information

Application number:: 10/632,711
Filing Date:: 08/01/03
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)::
Number of copies of CRF::
Title:: NEW USES FOR INHIBITORS OF INOSINE MONOPHOSPHATE DEHYDROGENASE
Attorney Docket Number:: 02307O-124010US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 3
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Dennis
Middle Name:: A.
Family Name:: Carson
Name Suffix::
City of Residence:: La Jolla
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 9728 Keeneland Row
City of Mailing Address:: La Jolla
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 92037

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Switzerland
Status:: Full Capacity
Given Name:: Lorenzo
Middle Name:: M.
Family Name:: Leoni
Name Suffix::
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 3908 Via Tranquilo
City of Mailing Address:: San Diego
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 92122

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Howard

Middle Name:: B.

Family Name:: Cottam

Name Suffix::

City of Residence:: Escondido

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 3144 Willow Creek Place

City of Mailing Address:: Escondido

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 92027

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/400,583	08/02/02

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::